

READ INSTRUCTIONS BEFORE COMPLETING TRANSCRIPT ORDER FORM - 4/2014

All items in Part I must be provided, otherwise your form will be returned. *Please type or write legibly with a pen.*

Item 1. REQUESTOR NAME - Provide your Full Name.

Item 2. EMAIL - Provide your Email Address. **Your Email must be provided.**

Item 3. PHONE - Provide your Office and Cell. **Your Phone Numbers must be provided.**

Item 4. MAILING ADDRESS - Provide your Mailing Address.

Item 5. CASE NAME - Provide the Full Case Name (example - Comm. v. John Doe or John Doe v. Jane Smith)

Item 6. IS THIS AN APPEAL? - If this case is on appeal, circle YES. If this case is not on appeal, circle NO.

Item 7. DOCKET NUMBER - Provide the Full Docket Number (example - SUCR2012-01234 or SUCV2012-56789).
County must be provided.

Item 8. JUDGE & COURTROOM - Provide the Name of the Judge that presided over the case and Courtroom case was held.
Judge, Courtroom must be provided.

Item 9. DATE AND TIME OF COURT PROCEEDING - **Date, Start Time, End Time of the court proceeding must be provided.** *If you don't know the exact start/end time, AM or PM is helpful in locating the specific case on the audio recording.*

AUDIO RECORDING AND TRANSCRIBER ASSIGNMENT - *Audio recordings from the court take time; especially if multiple days of proceedings are requested.* When OTS receives the audio recording from the court, a transcriber will be assigned.

Item 10. TRANSCRIPT ORDERED - Check the appropriate box to identify Transcript Ordered: Original, Copy, Original & Copy, Rush Original, Rush Copy, Rush Original & Copy. **A Copy may ONLY be ordered if an Original has been previously prepared.** For an Appeal, the Appellant orders an Original & Copy; the Appellee orders a Copy.

ESTIMATED COST OF REGULAR AND RUSH TRANSCRIPTS - Estimated costs of transcripts are based on producing approximately 50 pages of transcript for 1 hour of recording. **Regular delivery of 1 hour of recording costs \$150.00** (50 pages at \$3.00 per page). **Rush delivery of 1 hour of recording costs \$225.00** (50 pages at \$4.50 per page).

The transcriber will provide you with an estimated cost, deposit payment amount, and expected delivery date. When the transcriber receives your deposit payment, they will provide you with an expected delivery date.

DEPOSIT PAYMENT AND TRANSCRIPT DELIVERY (DO NOT SEND PAYMENT TO OTS) - **The deposit payment to the transcriber must be made within 5 days for Regular Delivery and 1 day for Rush Delivery.** ***If you do not provide the transcriber with the deposit payment within this time frame, your order will be cancelled.*** When the transcriber confirms your deposit payment has been received, you can expect your transcript within 90 days for Regular Delivery or 1-7 days for Rush Delivery, **depending on the length of the audio recording.**

Item 11. INDIGENT TRANSCRIPTS - Indigent transcripts are paid for by the Committee for Public Counsel Services (CPCS). **A deposit payment is not required.** When OTS receives the audio recording from the court, a transcriber will be assigned to prepare your transcript within 90 days. Check the appropriate box to identify the Transcript Ordered: Original, Copy. **If applicable, provide NAC (Notice of Assignment of Counsel) Number.**

Item 12. STATEMENT - The requestor must agree to pay the transcriber for work performed up until the transcriber completes the transcript or the requestor cancels the order in writing.

Item 13. SIGNATURE - Provide your Signature.

Item 14. DATE - Provide the Date.



TRANSCRIPT ORDER FORM - 4/2014

Email: ots@jud.state.ma.us, Fax: 617-878-0762, Phone: 617-878-0225

Part I - TO BE COMPLETED BY REQUESTOR

Email or FAX Form to OTS for Superior, Suffolk Juvenile, Boston Housing Courts, JAVS recorded proceedings.

Call 617-788-8130 for Superior Court, Court Reporter recorded proceedings.

1. REQUESTOR FULL NAME	2. EMAIL <i>(must be provided)</i>	3. PHONE <i>(must be provided)</i> Office: Cell:
4. MAILING ADDRESS	5. CASE NAME	6. IS THIS AN APPEAL? YES or NO <i>(circle one)</i>
7. DOCKET NUMBER <i>(County must be provided)</i>		8. JUDGE & COURTROOM <i>(must be provided)</i>

9. DATE AND TIME OF COURT PROCEEDING *(must be provided)*:

DATE: _____ START TIME: _____ END TIME: _____ DATE: _____ START TIME: _____ END TIME: _____

DATE: _____ START TIME: _____ END TIME: _____ DATE: _____ START TIME: _____ END TIME: _____

DATE: _____ START TIME: _____ END TIME: _____ DATE: _____ START TIME: _____ END TIME: _____

If you don't know the exact start/end time, AM or PM is helpful in locating the specific case on the audio recording.

ATTACH SEPARATE SHEET FOR ADDITIONAL DATES AND TIMES OF PROCEEDINGS.

10. TRANSCRIPT ORDERED: (For More Information, READ INSTRUCTIONS, Item 10.)

- | | |
|--|--|
| <input type="checkbox"/> ORIGINAL (\$3.00 per page Regular Delivery) | <input type="checkbox"/> RUSH ORIGINAL (\$4.50 per page Rush Delivery) |
| <input type="checkbox"/> COPY (\$1.00 per page Regular) | <input type="checkbox"/> RUSH COPY (\$1.50 per page Rush) |
| <input type="checkbox"/> ORIGINAL & COPY (\$4.00 per page Regular) | <input type="checkbox"/> RUSH ORIGINAL & COPY (\$6.00 per page Rush) |

A COPY may ONLY be ordered if an ORIGINAL has been previously prepared.

For an APPEAL, the Appellant orders an Original & Copy; the Appellee orders a Copy.

11. INDIGENT TRANSCRIPTS:

Indigent transcripts are paid for by the Committee for Public Counsel Services (CPCS). **A deposit payment is not required.** When OTS receives the audio recording from the court, a transcriber will be assigned to prepare your transcript within 90 days.

☐ ORIGINAL ☐ COPY _____

If applicable, provide **NAC (Notice of Assignment of Counsel) NUMBER:**

12. STATEMENT: <i>I agree to pay the transcriber until the transcriber completes the transcript or I cancel in writing.</i>	13. SIGNATURE	14. DATE
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Part II - TO BE COMPLETED BY STAFF

15. DATE CD RECEIVED FROM COURT	16. CD LENGTH IN MINUTES	17. TRACKING NUMBER
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